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PATIENTS' PERSPECTIVE ON DOCTOR'S ATTIRE

Aims & Objective:

The main aim of this study is to observe the patient's perspective on doctor's attire.

Materials and Method:

This study was carried out among four hundred patients in both department of Gynaecology and obstetrics, and otorhinolaryngology in Kathmandu university hospital, Dhulikhel from 1st June to 1st July 2012. Questionnaires were prepared which contains the demographic data and patients' answers of 'yes' or 'no' to the questions asked. All data were analyzed using SPSS 16.0 software with frequency and percentage.

Results:

About 343(85.8%) patients are below 45 years. The male to female ratio is 0.8:1. About 205(51.2%) patients had education level of primary/ high school, whereas only 19(4.8%) patients had master degree. About 329(82.3%) patients want their doctors to wear white coat. 208(52%) patients think that white coat is required for identification, whereas 143(35.7%) patients think that it is required for preventing infection. All our patients think that nametag is required for identification of the doctor. 290(72.6%) patients think that it is required for doctors to wear stethoscope. Most of our patients explained that stethoscope is required for patient examination. Similarly, out of 110 patients, 79(71.9%) patients explained that the stethoscope may not be required for all doctors.

Conclusion:

Patient prefers doctors to wear white coat, nametag and stethoscope as these attire gives doctor more professional look and also easy to identify the treating doctors.

Key words: Attire, Nametag, Patients' perspective, Stethoscope

INTRODUCTION:

The physician's dress up is one of the important means to increase patient comfort level during examination, which is vital for high quality care. Hippocrates believed that physicians must be clean, well-dressed and meet their patients with good mood.¹ There had been several studies regarding patient's first impression on physician competence by their physical appearance.²⁻⁴ The study performed by Gooden et al⁵ showed that the patient feel more confident and better to communicate with physician who wear white coats. Similarly study performed in Maneham and Shvartzman⁶ and Anvik⁷ showed that the majority of patients prefer physicians to wear white coats. One study conducted by Dunn et al⁸ showed that 65% of the patients wanted to see their physician in white coat. Likewise another study showed that the name tag were very important for physician attire,⁹ whereas other study showed that the attire of physician had no influence on choice of family physician¹⁰ or satisfaction.⁶ Although there is debate regarding doctor's attire and also the patients' perspective on dress code has not been extensively investigated. So, this study is conducted.

The purpose of our study is to observe the patient's perspective on doctor's attire. To the best of our knowledge, this is the first study of its kind being carried out in Nepal.

MATERIALS AND METHOD:

This cross-sectional study was carried out among four hundred patients who attended the out patient department of both Gynecology and obstetrics, and otorhinolaryngology in Kathmandu university hospital, Dhulikhel from 1st June to 1st July 2012 after taking informed consent from patients. The study was performed in following phases. Questionnaire were framed, inspired and based on the study performed by Douse et al¹¹ and Hathorn et al.¹² Regarding the validity and reliability of the questionnaire, consultation was done with statistician and the department of community medicine. The survey questionnaires were framed in English and translated into native Nepali. The questionnaires covered the demographic data and patients' answers of 'yes' or 'no' to the questions of "should doctors wear white coat? "Patients' were also given the opportunity to qualify the answer by agreeing or disagreeing the suggestions given. Patients' were also asked to answer "yes", "no" or to give their own reason to the questions regarding "should doctors wear nametag and stethoscope. Patients' verbal consent were taken and then instructed clearly before answering the questionnaire. Uneducated patients were assisted in

accomplishing the questionnaires. These records were collected and analyzed by simple manual analysis using frequencies and percentages with SPSS 16.0 version

RESULTS:

The age distribution of patient is as shown in table 1. About 343(85.8%) patients are below 45 years. The mean age of patient was 46.5+/-8.6 (range= 15-78 years)

Tab. 1: Age distribution (n=400)

Age	No. of patients(%)
15-30	238(59.5%)
31-45	105(26.3%)
46-60	38(9.5%)
>60	19(4.7%)

The male to female ratio is 0.8:1 as shown in tab.2.

Tab.2: Sex distribution (n=400)

Sex	No. of patients(%)
Male	188(47%)
Female	212(53%)

About 205(51.2%) patients had education level of primary/ high school whereas only 19(4.8%) patients had master degree as shown in tab.3.

Tab. 3: Educational level of patients(n=400)

Level of education	No. of patients(%)
Primary/High School	205(51.2%)
Certificate	90(22.5%)
Baccalaureate	86(21.5%)
Masters	19(4.8%)

The tab. 4 showed that about 329(82.3%) patients want their doctors to wear white coat.

Tab. 4: Patients answers regarding the requirement of wearing the white coat by doctors. (n=400)

Level of education	Yes(%)	No(%)
Primary/High School	150(37.5%)	55(13.7%)
Certificate	80(20%)	10(2.5%)
Baccalaureate	80(20%)	6(1.5%)
Masters	19(4.8%)	0(0%)

The table 5 showed that 208(52%) patients think that white coat is required for identification whereas 143(35.7%) patients think that it is required for preventing infection.

Tab. 5: Patients reasons regarding wearing of white coat by doctor. (n=400)

Level of education	Tradition	Identification	Prevent infection	Professional look
Primary/High School	10(2.5%)	134(33.5%)	56(14%)	5(1.2%)
Certificate	5(1.2%)	45(11.3%)	35(8.7%)	5(1.2%)
Baccalaureate	0(0%)	29(7.2%)	43(10.7%)	14(3.5%)
Masters	0(0%)	0(0%)	9(2.3%)	10(2.5%)

The tab. 6 showed that all the patients wanted their doctors to wear nametag.

Tab. 6: Patients answers regarding wearing nametag or not by doctors.(n=400)

Level of education	Yes	No
Primary/High School	205(51.2%)	0(0%)
Certificate	90(22.5%)	0(0%)
Baccalaureate	86(21.5%)	0(0%)
Masters	19(4.8%)	0(0%)

All our patients think that nametag is required for identification as shown in tab. 7.

Tab.7: Patients reasons regarding wearing of nametag by doctors (n=400)

Level of education	Identification
Primary/High School	205(51.2%)
Certificate	90(22.5%)
Baccalaureate	86(21.5%)
Masters	19(4.8%)

As shown in the table 8 290(72.6%) patients think that it is required for doctors to wear stethoscope.

Tab. 8: Patients answer regarding the requirement of wearing the stethoscope by doctor. (n=400)

Level of education	Yes	No
Primary/High School	157(39.3%)	48(12%)
Certificate	57(14.3%)	33(8.2%)
Baccalaureate	57(14.3%)	29(7.2%)
Masters	19(4.7%)	0(0%)

Out of 290 patients, 230(79.3%) patients explained that stethoscope is required for patient examination as shown in table 9.

Tab. 9: Patients reasons regarding wearing of stethoscope by doctors(n=290)

Level of education	Identification	Patient examination
Primary/High School	50(17.3%)	107(36.9%)
Certificate	7(2.4%)	50(17.3%)
Baccalaureate	2(0.7%)	55(18.9%)
Masters	1(0.3%)	18(6.2%)

Similarly, out of 110 patients,79(71.9%) patients explained that the stethoscope may not be required for all doctors as shown in table 10.

Tab. 10: Patients reasons regarding not wearing of stethoscope by doctors (n=110)

Level of education	Cross-infection	Not required for all doctors
Primary/High School	8(7.3%)	40(36.4%)
Certificate	11(10%)	22(20%)
Baccalaureate	12(10.8%)	17(15.5%)
Masters	0(0%)	0(0%)

DISCUSSION:

Doctors' attire has known to impact patients' trust and confidence for better clinical practice. So, it is important for the doctor's to wear proper dress as careful consideration of attire and labeling forms helps to improve the patient- doctor's relationship. Regarding the age distribution, most of our patients are within 45 years which is similar to study performed by Najafi et al¹³ and McKinsty and Wang.⁴ Likewise the distribution of sex and educational status is similar to study performed by Najafi et al.¹³ Regarding the wearing of white coat by doctor, 82.5% of our patients answered that the doctors should wear white coat which was similar to study performed by Najafi et al¹³ and Ikusaka et al.¹⁴ Whereas it was differ from the study performed by Douse et al¹¹ which showed only 56% of patients favoured doctors wearing white coats. Our study also differ from other different study performed at different places.^{5,8,12,15-17} This vast difference in patient perspective could be because in our hospital most of patient came from village areas and they think that doctors should wear white coat. While asking the patient regarding reasons for wearing white coat, 87.7% of our patients replied that it's for identification and to prevent infection which is similar to study performed by Douse et al¹¹, but several other studies showed that white coats and nurses' uniforms suggest potential risk of bacterial contamination.¹⁸⁻²¹ The variation in results could be because patient doesn't know the core risk of contamination of white coat by different organisms while examining the patients. Similarly, 8.7% of our patients replied that wearing of white coats provide professional look which is similar to study performed by Gooden et al⁵ but differ from the study performed by Palazzo and Hocken²² which showed 93% of patients replied as professional look. The difference could be because of different opinions of patients in different countries, time period of study and also educational status of patients.

Regarding the wearing of nametag, all our patients answered that the doctors should wear name tag and all of them answered that it is required for identification. Results of our study somehow similar to that performed by Keenum et al²³ and Najafi et al¹³. The reason could be because our patients are very curious in knowing the treating physician name. Regarding the wearing of stethoscope, 72.6% of our patients, mainly well educated, replied that doctors should wear stethoscope which is similar to study performed by Keenum et al²³ 79.3% of our patients, who were mostly well educated, gave the reason that it is required for patients examination while rest replied that it is required for identification. Reasons regarding not wearing stethoscope, our patients replied that it causes cross infection and it may not be required for all the doctors. This differ in results could be because of study conducted in 2 different departments where in one department stethoscope is frequently used and in other department it is not. The size of our study group is well enough to provide a good cross-section and sufficient power to make small differences. Even then the limitation of our study is that, this finding could not be generalised to all OPD patients and also In patients. So, it is require to perform study in all Out patients and in patient departments of hospital.

CONCLUSION:

Patient prefers doctors to wear white coat, nametag and stethoscope as these attire gives doctor more professional look and also easy to identify the treating doctors.

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